



APPLICATION FOR MEMBERSHIP

Please print:

Title (Mr / Mrs / Ms).....

First Name.....

Surname.....

Address.....

.....

.....

Telephone no.....

Mobile.....

Email.....

I hereby apply for Full member/Junior Player/Social membership (delete as appropriate) of the Winslow Bowls Club and agree at all times to abide by the rules of the club. I agree that the decision of the club committee in respect of this application is final.

DATA PROTECTION: The club only holds data that is necessary for administration purposes and that has been given to the club voluntarily as follows: -

Name and postal address.

Telephone Number(s) and Email address.

By completing this application form Winslow bowls Club will hold and use this information as necessary for administration purposes and sharing with other members. Please confirm by ticking the box below.

I give my consent

I do not give my consent

Consent can be changed at any time in writing or by email to the clubs Secretary.

Signed _____ Date _____

Proposed by _____ Signature _____

Seconded by _____ Signature _____